## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

P-3995-1

| CLAIMS AS FILED - PART I   |  |   |                |                                   |                         |                                 |          | SMALL ENTITY                          |                        |                | OTHER THAN |                        |  |
|--|--|---|----------------|-----------------------------------|-------------------------|---------------------------------|----------|---------------------------------------|------------------------|----------------|------------|------------------------|--|
| _  |  |   | (Column 1)     |                                   | <u>(Colu</u>            | Column 2)                       |          | TYPE [                                |                        | OR             | SMALL      | ENTITY                 |  |
| TOTAL CLAIMS   |  |   | .1.            |                                   | · .                     |                                 |          | RATE                                  | FEE                    | 7              | RATE       | FEE                    |  |
| FOR  |  |   | NUMBER FILED   |                                   | NUME                    | NUMBER EXTRA                    |          | BASIC FE                              | E 385.00               | OR             | BASIC FEE  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | j minus 20=    |                                   | * 0                     |                                 | ٠        | X\$ 9=                                | 0.                     | OR             | X\$18=     |                        |  |
| INDEPENDENT CLAIMS   |  |   | minus 3 = **   |                                   | *                       | υ                               |          | X43=                                  | 0                      | OR             | X86=       |                        |  |
| М  | JLTIPLE DEPE                                   | NDENT CLAIM F                             | RESENT         |                                   |                         |                                 |          | +145=                                 | 0                      | OR             | +290=      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                |                                   |                         |                                 | ı        | TOTAL                                 | 385                    | OR             | TOTAL      |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |                |                                   |                         |                                 |          | OTHER THAN                            |                        |                |            |                        |  |
| _  | (Column 1) (Column 2) (Co                      |   |                |                                   |                         |                                 |          | SMALL                                 | ENTITY                 | OR             | SMALL      |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHI<br>NUME<br>PREVIO<br>PAID F | BER<br>JUSLY            | PRESENT<br>EXTRA                |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |                | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus          | **                                |                         | =                               |          | X\$ 9=                                |                        | OR             | X\$18=     |                        |  |
| AME  | Independent                                    | *   | Minus          | ###                               | CLAIM                   | =                               |          | X43=                                  |                        | OR             | X86=       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                   |                         |                                 |          | +145=                                 |                        | OR             | +290=      |                        |  |
|  |  |   |                |                                   |                         |                                 | L        | TOTAL                                 |                        | OR             | TOTAL      |                        |  |
|  |  | (Column 1)                                |                | (Colum                            | n 3)                    | (Column 3)                      | A        | DDIT. FEE                             |                        | 10.1           | ADDIT. FEE |                        |  |
| _  |  | CLAIMS                                    |                | HIGHE                             |                         | (Column 3)                      | -        |                                       | AODI                   | 1              |            | 4551                   |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | PAID F                            | USLY                    | PRESENT<br>EXTRA                |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |                | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus          | **                                |                         | =                               |          | X\$ 9=                                | :                      | OR             | X\$18=     |                        |  |
|  | Independent                                    | *<br>NTATION OF MU                        | Minus          | SAIDENT (                         | CLAIRA                  | =                               |          | X43=                                  | ,                      | OR             | X86=       |                        |  |
|  | 11101111202                                    | NATION OF MIC                             | CHIPCE DEF     | ENDERT                            | CLATIVI                 |                                 |          | +145=                                 |                        | OR             | +290=      |                        |  |
|  |  |   |                |                                   |                         |                                 |          | TOTAL                                 |                        | OR ,           | TOTAL      |                        |  |
|  | •  | (Column 1)                                |                | (Calum                            | O\                      | (Oalves a 0)                    | Al       | ODIT. FEE                             |                        | , <sub>_</sub> | DOIT. FEEL | - :                    |  |
|  | `  | CLAIMS                                    | · .            | (Colum<br>HIGHE                   |                         | (Column 3)                      | _        | · · · · · · · · · · · · · · · · · · · |                        | _              |            |                        |  |
| MEN  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUMBI<br>PREVIOL<br>PAID FO       | JSLY                    | PRESENT<br>EXTRA                |          | RATE                                  | ADDI-<br>TIONAL<br>FEE |                | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus          | **                                |                         | =                               | T        | X\$ 9=                                |                        | OR             | X\$18=     |                        |  |
|  | independent                                    | ,   | Minus          | ***                               |                         | =                               | $\vdash$ | Y42=                                  |                        |                |            |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                   |                         |                                 |          | X43=                                  |                        | OR             | X86=       |                        |  |
| * If   | the entry in colum                             | nn 1 is less than the                     | onto in onto   |                                   | <b>02</b> i=!           | 2                               | L        | +145=                                 |                        | OR             | +290=      |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                |                                   |                         |                                 |          |                                       |                        |                |            |                        |  |
| T  | he "Highest Num                                | ther Previously Paid                      | For" (Total or | Independen                        | ess than<br>t) is the h | 3, enter "3."<br>nighest number | found    | I in the appr                         | opriate box            |                |            |                        |  |